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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identity Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your ting with the trustee.	Sherry First name L. Middle name Rowl Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-0519	

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Case number (if known)

Debtor 1 Sherry L. Rowl

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Business name(s) Include trade names and doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2303 Colorado Avenue Rockford, IL 61108 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Winnebago County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Sherry L. Rowl Case number (if known)

	The about a state of the				of and and Mark Don't di	44.110.00.00.40(1).6
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> find the first of the f	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	■ C	hapter 7			
		□с	hapter 11			
		□с	hapter 12			
		ПС	hapter 13			
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					tallments. If you choose this options to (Official Form 103A).	n, sign and attach the Application for Individuals to Pay
			but is not req	uired to, waive	your fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line tha installments). If you choose this option, you must fill out
						ial Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	■ No				
	iast o years:	□ 16	es. District		When	Case number
			District		when When	2
			District		When	Case number Case number
10.	Are any bankruptcy	■ No	0			
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	98.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	o. Go to l	ne 12.		
	residence.	□Y€	es. Has yo	ur landlord obta	ained an eviction judgment agains	t you and do you want to stay in your residence?
				No. Go to line	12.	
				Yes. Fill out In bankruptcy per		ludgment Against You (Form 101A) and file it with this

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Document Page 4 of 58 Case number (if known) Debtor 1 Sherry L. Rowl Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Sherry L. Rowl

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Der	Snerry L. Rowi			Case nun	nber (if known)
Par	t 6: Answer These Quest	ions for Re	porting Purposes		
16.	What kind of debts do you have?			consumer debts? Consumer debts are crsonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
				business debts? Business debts are delevestment or through the operation of the b	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busi	ness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and			. Do you estimate that after any exempt p available to distribute to unsecured credito	roperty is excluded and administrative expenses ors?
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes		
18.	How many Creditors do	■ 1-49		1 ,000-5,000	☐ 25,001-50,000
	you estimate that you owe?	■ 1-49 □ 50-99		☐ 5001-10,000	☐ 50,001-100,000
	owe:	□ 100-19 □ 200-99		□ 10,001-25,000	☐ More than100,000
19	How much do you	- 42 45		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to	■ \$0 - \$5 □ \$50.00	0,000 1 - \$100,000	☐ \$1,000,001 - \$10 million	□ \$1,000,000,001 - \$1 billion
	be worth?		01 - \$500,000	☐ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion
		□ \$500,0	01 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	\$0 - \$5	0,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			01 - \$500,000 01 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have exa	amined this petition, and I de	eclare under penalty of perjury that the in	formation provided is true and correct.
				7, I am aware that I may proceed, if eligit relief available under each chapter, and	ole, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
				d not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).	
		I request r	relief in accordance with the	e chapter of title 11, United States Code, s	specified in this petition.
		bankrupto and 3571.	y case can result in fines up		ey or property by fraud in connection with a 10 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Sherry L	y L. Rowl Rowl	Signature of De	btor 2
			of Debtor 1	, and the second	
		Executed	on July 29, 2017	Executed on	
			MM / DD / YYYY		MM / DD / YYYY

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Debtor 1 Sherry L. Rowl Page 7 of 58 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel A. S _I	oringer	Date	July 29, 2017
Signature of Attor	ney for Debtor		MM / DD / YYYY
Daniel A. Sprir	nger		
Printed name			
Springer Law I	Firm		
Firm name			
2222 E State S	t		
Suite 107			
Rockford, IL 6	1104		
Number, Street, City, S	tate & ZIP Code		
Contact phone 81:	5.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Dar number 9 State			

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mation to identify your	case:		
Sherry L. Rowl			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Sherry L. Rowl First Name	Sherry L. Rowl First Name Middle Name First Name Middle Name	Sherry L. Rowl First Name Middle Name Last Name First Name Middle Name Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	47,067.50
	1c. Copy line 63, Total of all property on Schedule A/B	\$	47,067.50
Pa	st 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,765.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	685.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,394.02
	Your total liabilities	\$	47,844.02
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,277.08
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,188.00
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Case number (if known) Debtor 1 Sherry L. Rowl

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$_	6,235.39
		_	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	685.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	685.00

Case 17-81768 Doc 1 Filed 07/29/17 Entered 07/29/17 11:13:53 Desc Main Document Page 10 of 58 Fill in this information to identify your case and this filing: Debtor 1 Sherry L. Rowl Middle Name First Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Dodge Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Ram Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2007 Year: Debtor 2 only Current value of the Current value of the 113.000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$11.425.00 \$5,712.50 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,712.50 pages you have attached for Part 2. Write that number here.....

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

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Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Case number (if known) Document Debtor 1 Sherry L. Rowl

				Clairi	ns or exemptions.
16	_ ' ''	your wallet, in your ho	ome, in a safe deposit box, and on hand	d when you file your petition	
	□ No ■ Yes				
				Cash	\$5.00
17			ounts; certificates of deposit; shares in a	credit unions, brokerage houses, ar	nd other similar
	□ No		Institution name:		
	Yes		mondation name.		
	17.1	Checking	Associated Bank		\$50.00
18	B. Bonds, mutual funds, or publes: Bond funds, investor Examples: Bond funds, investor Exam		okerage firms, money market accounts		
	■ No □ Yes	Institution or issuer	name:		
19	Non-publicly traded stock and joint venture	d interests in incorp	orated and unincorporated business	es, including an interest in an LL	.C, partnership, and
	■ No				
	☐ Yes. Give specific information Na	n about them ame of entity:		% of ownership:	
20	Negotiable instruments include	personal checks, cas	otiable and non-negotiable instrumer shiers' checks, promissory notes, and mansfer to someone by signing or deliveri	noney orders.	
	☐ Yes. Give specific information	about them			
		suer name:			
21	. Retirement or pension account Examples: Interests in IRA, ER		103(b), thrift savings accounts, or other	pension or profit-sharing plans	
	☐ Yes. List each account separa Type	ately. e of account:	Institution name:		
22		sits you have made so	o that you may continue service or use f public utilities (electric, gas, water), tele		ners
	■ No □ Yes		Institution name or individual:		
23	3. Annuities (A contract for a peri No	odic payment of mone	ey to you, either for life or for a number	of years)	
	· · · ·	me and description.			
24	I. Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b) ■ No		ualified ABLE program, or under a q	ualified state tuition program.	
		name and description	n. Separately file the records of any inte	erests.11 U.S.C. § 521(c):	
25	5. Trusts, equitable or future int	erests in property (o	other than anything listed in line 1), a	nd rights or powers exercisable f	for your benefit

 $\hfill\square$ Yes. Give specific information about them...

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De	ebtor 1 Sherry L. Rowl			c	ase number (if known)	
26.	Patents, copyrights, tradema Examples: Internet domain na No				s	
	☐ Yes. Give specific information	on about them				
	 Licenses, franchises, and ot Examples: Building permits, e No Yes. Give specific information 	xclusive licenses		n holdings, liquor license	es, professional license	es
Mo	oney or property owed to you	?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you ■ No					
	■ No□ Yes. Give specific information	on about them, inc	cluding whether you alre	ady filed the returns and	d the tax years	
	Family support Examples: Past due or lump s □ No ■ Yes. Give specific information	77.1	usal support, child supp	ort, maintenance, divorc	e settlement, property	settlement
		Bac	k Child Support		Obild Comment	\$40,000.00
					Child Support	Ψ40,000.00
30.	Other amounts someone ow Examples: Unpaid wages, dis benefits; unpaid lo	ability insurance		efits, sick pay, vacation		
	Examples: Unpaid wages, dis benefits; unpaid lo	ability insurance ans you made to		efits, sick pay, vacation		
31.	Examples: Unpaid wages, dis benefits; unpaid lo	ability insurance ans you made to on	someone else		pay, workers' comper	sation, Social Security
31.	Examples: Unpaid wages, disbenefits; unpaid lobenefits; unpaid lobene	ability insurance ans you made to on es or life insurance; h	someone else		pay, workers' comper	sation, Social Security
31.	Examples: Unpaid wages, disbenefits; unpaid lobenefits; unpaid lobene	ability insurance ans you made to on es or life insurance; hompany of each poompany name: is due you from living trust, expect	nealth savings account (olicy and list its value.	HSA); credit, homeowne Beneficiary	pay, workers' comper er's, or renter's insuran	ce Surrender or refund value:
31. 32.	Examples: Unpaid wages, disbenefits; unpaid lobenefits; lobe	ability insurance ans you made to on es or life insurance; I impany of each prompany name: is due you from living trust, expection whether or not ment disputes, in	nealth savings account (olicy and list its value. someone who has die of proceeds from a life in	HSA); credit, homeowned Beneficiary and surance policy, or are continuous and the continu	pay, workers' comperer's, or renter's insurant: " " " " " " " " " " " " "	sation, Social Security ce Surrender or refund value:
31. 32.	Examples: Unpaid wages, disbenefits; unpaid lobenefits; lobenefits; lobenefits; lobenefits lobenef	ability insurance ans you made to on as or life insurance; I impany of each prompany name: is due you from living trust, expection whether or not ment disputes, in	nealth savings account (olicy and list its value. someone who has die of proceeds from a life in you have filed a lawsu surance claims, or rights	HSA); credit, homeowned Beneficiary ed surance policy, or are continuous and the surance and the story made a demand for the story surance to sue	pay, workers' comperers, or renter's insurant.	sation, Social Security ce Surrender or refund value: sive property because
31.32.33.34.	Examples: Unpaid wages, disbenefits; unpaid lobenefits; Health, disability, one lobenefits; Health, disability, disability, disability, one lobenefits; Health, disability, disability, disability, disability, disabili	ability insurance ans you made to on es or life insurance; hompany of each prompany name: is due you from living trust, expection whether or not ment disputes, in idated claims of	nealth savings account (olicy and list its value. someone who has die of proceeds from a life in you have filed a lawsu surance claims, or rights	HSA); credit, homeowned Beneficiary ed surance policy, or are continuous and the surance and the story made a demand for the story surance to sue	pay, workers' comperers, or renter's insurant.	sation, Social Security ce Surrender or refund value: ive property because

 \square Yes. Give specific information..

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Debi	or 1 Sherry L. Rowi		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, include for Part 4. Write that number here			\$40,055.00
Part	5: Describe Any Business-Related Property You Own or Have an In	terest In. List any real est	ate in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-re	lated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property Y If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Intere	st In.	
16. C	Oo you own or have any legal or equitable interest in any fan	m- or commercial fishir	ng-related property?	
	■ No. Go to Part 7.			
	Yes. Go to line 47.			
■	Do you have other property of any kind you did not already li Examples: Season tickets, country club membership No Yes. Give specific information	st?		20.00
54.	Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		<u> </u>	\$0.00
56.	Part 2: Total vehicles, line 5	\$5,712.50		
57.	Part 3: Total personal and household items, line 15	\$1,300.00		
58.	Part 4: Total financial assets, line 36	\$40,055.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$47,067.50	Copy personal property total	\$47,067.50
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$47,067.50

Official Form 106A/B Schedule A/B: Property page 5

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Page 15 of 58 Document Fill in this information to identify your case: Debtor 1 Sherry L. Rowl Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify t	ne Property	You Claim	as Exempt
---------	------------	-------------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Household Furniture Line from Schedule A/B: 6.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)	
Ente from Goriodate 7VB. GT			100% of fair market value, up to any applicable statutory limit		
Computer, TV Line from Schedule A/B: 7.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
Line from Scriedule AVB. 1.1			100% of fair market value, up to any applicable statutory limit		
Used Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	735 ILCS 5/12-1001(a)	
Line from Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		
Wedding Ring Set, Costume Jewelry Line from Schedule A/B: 12.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)	
Line from Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit		
Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	735 ILCS 5/12-1001(b)	
Line Horr Scriedule A/D. 10.1			100% of fair market value, up to		

Document Page 16 of 58 Debtor 1 Sherry L. Rowl Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Associated Bank** 735 ILCS 5/12-1001(b) \$50.00 \$50.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Child Support: Back Child Support** 735 ILCS 5/12-1001(g)(4) 100% \$40,000.00 Line from Schedule A/B: 29.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

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Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 07/29/17

- No
- Yes

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Fill in this info	ormation to identify you	ır case:					
Debtor 1	Shorm I Bowl						
Debtor 1	Sherry L. Rowl	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
Linita d Otata a F	Danilou ontare Carout familia	NODTHEDN DISTRICT OF II	LINIOIC				
United States E	Bankruptcy Court for the	NORTHERN DISTRICT OF IL	LINOIS				
Case number							
(if known)	-				☐ Check	if this is an	
					amend	ed filing	
					_	J	
Official Fo	rm 106D						
Schodule	D. Craditors	Who Have Claims	Sacure	d by Property	•	12/15	
Scriedare	D. Creditors	Wild Have Claims	Jecuit	a by I Toperty		12/13	
	the Additional Page, fill it	If two married people are filing togetl out, number the entries, and attach it					
•	ors have claims secured by	v vour property?					
	•	his form to the court with your othe	r cehodulos	Vou have nothing also to	roport on this form		
_		•	i scriedules.	Tou have nothing else to	report on this form.		
Yes. Fill	in all of the information	below.					
Part 1: List	All Secured Claims						
2. List all secure	ed claims. If a creditor has	more than one secured claim, list the cre	editor separate	Column A	Column B	Column C	
for each claim. If	f more than one creditor has	a particular claim, list the other creditor	rs in Part 2. As	Amount of claim	Value of collateral	Unsecured	
much as possible	e, list the claims in alphabeti	cal order according to the creditor's nan	ne.	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Ally Fin	ancial	Describe the property that secures	the claim:	\$12,392.00	\$11,425.00	\$967.00	
Creditor's Na		2007 Dodge Ram 113,000 m			*************************************		
Attn: Ba	ankruptcy Dept.	200. 200go Raini 110,000 ii					
PO Box							
Minnea	oolis, MN	As of the date you file, the claim is: apply.	Check all that				
55438-0	901	Contingent					
Number, Str	eet, City, State & Zip Code	☐ Unliquidated					
		☐ Disputed					
Who owes the	debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only		An agreement you made (such as	mortgage or s	ecured			
Debtor 2 only		car loan)	0 0				
Debtor 1 and		☐ Statutory lien (such as tax lien, me	echanic's lien)				
	of the debtors and another	☐ Judgment lien from a lawsuit	,				
	claim relates to a	☐ Other (including a right to offset)					
community		, , ,					
Date debt was in	ncurred 2/28/2014	Last 4 digits of account num	shor				
Date dept was ii	Z/Z0/Z014	Last 4 digits of account fluir	inei				
		Book the discount of the con-	41 1 . 2	£0.070.00	****	fo 470 00	
2.2 Persona Creditor's Na	al Finance	Describe the property that secures	tne claim:	\$2,373.00	\$200.00	\$2,173.00	
Creditor S No	anie	Computer, TV					
Attn. Ba	nkruptov Dopt						
	ankruptcy Dept. rth Mulford Rd.	As of the date you file, the claim is:	Check all that				
	d, IL 61107	apply. Contingent					
	eet, City, State & Zip Code	Unliquidated					
rtumber, eur	oot, ony, onato a zip oodo	☐ Disputed					
Who owes the	debt? Check one.	Nature of lien. Check all that apply.					
■ Debtor 1 only		■ An agreement you made (such as	mortages er -	ocured			
,		car loan)	mongage or s	ecurea			
Debtor 2 only		_	oboniala !!\				
	Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit						
	of the debtors and another claim relates to a	☐ Judgment lien from a lawsuit					
Check if this community		☐ Other (including a right to offset)					
-							
Date debt was in	ncurred	Last 4 digits of account num	nber				

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Debtor 1	Sherry L. Rowl			Case number (if know)	
	First Name	Middle Name	Last Name		
Add the	dollar value of your	entries in Column A on	this page. Write that number here:	\$14,765.	00
	the last page of you	ır form, add the dollar va	lue totals from all pages.	\$14,765.	00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-81768 Doc 1 Filed 07/29/17 Entered 07/29/17 11:13:53 Desc Main Page 19 of 58 Document Fill in this information to identify your case: Debtor 1 Sherry L. Rowl Middle Name Last Name First Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 \$685.00 IRS \$685.00 \$0.00 Last 4 digits of account number Priority Creditor's Name **Centralized Insolvency Operation** When was the debt incurred? 2016 PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes Income Taxes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you?

□ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Case number (if know)

4.1 **Avant Credit** Last 4 digits of account number \$5.848.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 640 N La Salle Dr. Suite 535 Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes 4.2 **Barclays Bank Delaware** Last 4 digits of account number \$637.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 125 S West St. Wilmington, DE 19801 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card Purchases** Other. Specify 4.3 Capital One Bank USA NA Last 4 digits of account number \$516.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

Debtor 1 Sherry L. Rowl

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Debtor 1 Sherry L. Rowl Case number (if know) 4.4 Capital One Bank USA NA Last 4 digits of account number \$863.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 30281 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.5 **Comenity Bank** Last 4 digits of account number \$242.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card Purchases** Other. Specify 4.6 **Crusader Clinic** Last 4 digits of account number \$918.00 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 1200 W. State St. Rockford, IL 61102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Bills

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Debtor 1 Sherry L. Rowl Case number (if know) 4.7 **Elan Financial Services** Last 4 digits of account number \$2.994.00 Nonpriority Creditor's Name P.O. Box 108 When was the debt incurred? Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.8 First National Credit CA \$420.00 Last 4 digits of account number Nonpriority Creditor's Name 500 E 60th St N When was the debt incurred? Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card Purchases** Other. Specify **First Premier Bank** 4.9 Last 4 digits of account number \$909.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 3820 N Louise Ave Sioux Falls, SD 57107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes

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Debtor 1 Sherry L. Rowl Case number (if know) 4.1 \$728.00 First Premier Bank Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. 3820 N Louise Ave Sioux Falls, SD 57107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases ☐ Yes 4.1 \$1,610.00 **Kohls** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 3115 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes 4.1 Lane Bryant Retail \$874.00 Last 4 digits of account number Nonpriority Creditor's Name 450 Winks Ln When was the debt incurred? Bensalem, PA 19020 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Extension ☐ Yes

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1 Sherry L. Rowl	Case number (if know)	
MABT/CONTFIN	Last 4 digits of account number	\$497.00
Nonpriority Creditor's Name PO Box 8099 Newark, DE 19714	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card Purchases	
Merrick Bank	Last 4 digits of account number	\$1,051.00
Nonpriority Creditor's Name		
Attn: Bankruptcy Dept.	When was the debt incurred?	
PO Box 9201 Old Bethpage, NY 11804		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Credit Card Purchases	
Mid America B&T Genesis	Last 4 digits of account number	\$602.00
Nonpriority Creditor's Name		•
PO Box 4499	When was the debt incurred?	
Beaverton, OR 97076 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	and year may and statut to shook all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

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Document Page 25 of 58 Case number (if know) Debtor 1 Sherry L. Rowl Mutual Management Services Co., 4 1 \$955.00 6 LLC Last 4 digits of account number Nonpriority Creditor's Name 7177 Crimson Ridge Dr., Suite 10 When was the debt incurred? PO Box 8740 Rockford, IL 61126-6235 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecting for Creditor ☐ Yes 4.1 \$1,508.00 **Oppurtunity Financial LLC** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11 E. Adams Street Suite 501 Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Personal Loan ☐ Yes 4.1 **OSF St. Anthony Med Center** \$946.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 5510 East State St. Rockford, IL 61108-2381 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

■ Other. Specify Medical Bills

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor	1 Sherry L. Rowl	Case number (if know)	
4.1	Deal-ford Health System		¢004.00
Rockford Health System Nonpriority Creditor's Name Attn: Bankruptcy Dept.		Last 4 digits of account number	\$894.00
		When was the debt incurred?	
	2400 N Rockton Ave		
	Rockford, IL 61103	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.2			
0	Rockford Radiology Nonpriority Creditor's Name	Last 4 digits of account number	\$737.00
	Attn: Bankruptcy Dept.	When was the debt incurred?	
	2400 N Rockton Ave		
	Rockford, IL 61103 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.2	Security Finance Corporation	Last 4 digits of account number	\$1,900.00
<u>. </u>	Nonpriority Creditor's Name		. ,
	Attn: Bankruptcy Dept.	When was the debt incurred?	
	PO Box 3146		
	Spartanburg, SC 29304 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Offeck an that apply	
	■ Debtor 1 only	□ Constitution	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Personal Loan

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Debtor 1 Sherry L. Rowl Case number (if know) 4.2 \$625.00 SYNCB/JC Penney Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 965007 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card Purchases ☐ Yes 4.2 SYNCB/Old Navy DC \$360.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.2 SYNCB/Wal-Mart \$741.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 965024 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Credit Card Purchases

Debt	Case 17-81768 Doc 1 or 1 Sherry L. Rowl	Filed 07/29/17	/lain
4.2 5	World Finance Company	Last 4 digits of account number	\$1,786.02
	Nonpriority Creditor's Name PO Box 6429 Greenville, SC 29606	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.2	www.lSpeedyLoans.com	Last 4 digits of account number	\$2,300.00
	Nonpriority Creditor's Name PO Box 184 Des Plaines. IL 60016	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.2	Zale Delaware	Look A divite of ecocyat number	\$933.00
7	Nonpriority Creditor's Name	Last 4 digits of account number	φ333.00
	375 Ghent Road Akron, OH 44333	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify Credit Extension

Name and Address

■ No

☐ Yes

On which entry in Part 1 or Part 2 did you list the original creditor?

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

 $\hfill\square$ Check if this claim is for a community

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Sherry L. Rowl		Case number (if know)
Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602	Line 4.18 of (Check one): Last 4 digits of account number	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Equifax PO Box 740256 Atlanta, GA 30374	On which entry in Part 1 or Part 2 did Line 4.24 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Experian PO Box 4500 Allen, TX 75013	On which entry in Part 1 or Part 2 did Line 4.24 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Jefferson Capital Systems Attn: Bankruptcy Dept. 16 Mcleland Rd Saint Cloud, MN 56303	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Portfolio Recovery Associates Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100 Norfolk, VA 23502	On which entry in Part 1 or Part 2 did Line 4.5 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.6 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.19 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address State Collection Service Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701	On which entry in Part 1 or Part 2 did Line 4.18 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address TransUnion 555 West Adams Street Chicago, IL 60661	On which entry in Part 1 or Part 2 did Line 4.24 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address World Finance Corporation Attn: Bankruptcy Dept. 2570 Charles St.	On which entry in Part 1 or Part 2 did Line 4.25 of (Check one):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Sherry L. Rowl

Rockford, IL 61108

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	685.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	685.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	32,394.02
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	32,394.02

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		Docume	III FAUC ST UI JO		
Fill in this information to identify your case:					
Debtor 1	Sherry L. Rowl				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the cor, Street, City, State and ZIP Co	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

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	0430 17 01700 1	Docume	nt Page 32 o	f 58	Desc Main
Fill in this i	information to identify your				
Debtor 1	Sherry L. Rowl				
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Casa numb					
Case numb (if known)	еі				☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ehtors			12/15
Jenea	dic II. Tour ood	CDIOIS			12/13
ill it out, an our name a		boxes on the left. Attach . Answer every question.	the Additional Page to	o this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
_ `			·		
■ No					
☐ Yes					
	in the last 8 years, have you a, California, Idaho, Louisiana,				states and territories include
■ No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in line : Form 1	2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make s	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt sthat apply:
3.1				☐ Schedule D, line	
	lame			☐ Schedule E/F, lir	
				☐ Schedule G, line	
N	lumber Street			_	
C	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			_ ☐ Schedule E, line	
				☐ Schedule G, line	
N	lumber Street			_	

State

City

ZIP Code

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Sil	in this information to identify your o					l			
	btor 1 Sherry L. R								
_	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS						
O Se a sup spo	fficial Form 106l chedule I: Your Inc as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	sible. If two married pec are married and not fili ar spouse is not filing w	ng jointly, and your sith you, do not include	spouse de infor	is liv mati	13 income MM / DD/ and Debtor 2), being with you, income	ed filing ent show as of the YYYY oth are elude info ouse. If	ormation about your more space is needed	11:
Pa 1.	Describe Employment Fill in your employment								_
١.	information.		Debtor 1	Debtor 1			2 or non	-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed			■ Emp	loyed		
	information about additional employers.		☐ Not employed				employed	d	
	• •	Occupation				Truck	Driver		
	Include part-time, seasonal, or self-employed work.	Employer's name	Android Industr	ies		Meibor	g, Inc.		_
	Occupation may include student or homemaker, if it applies.	Employer's address	1222 Crosslink Belvidere, IL 61		ard	3814 1 Rockfo	1th Stre		
		How long employed t	here? 2 mont	hs					
Pai	Give Details About Mo	nthly Income							_
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	eport for	any	ine, write \$0 in the	e space.	Include your non-filing	
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all	emplo	oyers for that pers	on on the	e lines below. If you nee	t
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,786.59	\$	4,799.49	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	

2,786.59

4,799.49

Calculate gross Income. Add line 2 + line 3.

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Debt	or 1	Sherry L. Rowl	-	Case	number (if known)				
				For	Debtor 1		Debtor 2 or		
	C	ulina Albana	4	Ф.	0.700.50		filing spou		
	Cop	y line 4 here	4.	\$_	2,786.59	\$	4,799	.49	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	961.20	\$	1,153	.34	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	143	.98	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0	.00	
	5e.	Insurance	5e.	\$	0.00	\$.99	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$.00	
	5g.	Union dues	5g.	_	0.00	\$.00	
	5h.	Other deductions. Specify: Life Insurance	_ 5h	+ \$_	0.00	+ \$.49	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	961.20	\$	1,347	.80	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,825.39	\$	3,451	.69	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00	\$	0	.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		_					
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	O	.00	
	8d.	Unemployment compensation	8d.		0.00	\$.00	
	8e.	Social Security	8e.	\$	0.00	\$.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_	0.00	\$.00	
	8g.	Pension or retirement income	8g.	_	0.00	\$.00	
	8h.	Other monthly income. Specify:	8h	+ \$_	0.00	+ \$	0	.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		0.00	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	3	1,825.39 + \$	3 4	51.69 = \$	5.2	77.08
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		·	1,020.00	0,10	71.00		11.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not accify:	deper		. ,	•	chedule J. 11. +\$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$		77.08
13.	Do v	ou expect an increase or decrease within the year after you file this form	?					mbined nthly ind	ome
		No.							
		Ves Evolain:							

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Fills	in this informa	tion to identify yo	our case.					
						O I:	de if their in	
Debi	tor 1	Sherry L. Ro	wi				ck if this is: An amended filing	
Debt	tor 2						•	ving postpetition chapter
(Spc	ouse, if filing)					_	13 expenses as of	the following date:
Unite	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILL	INOIS	-	MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	nses				12/15
Be a info nun	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	s possible. eded, atta ry questio	. If two married people ich another sheet to thi				
Part	Is this a joir	ibe Your House	hold					
••	■ No. Go to	line 2.	in a sanar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid:				
	=	-	st file Offici	al Form 106J-2, <i>Expens</i>	es for Separate House	hold of Debt	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		26	Yes
								□ No
								Yes
								□ No
								☐ Yes
								□ No
3.	Do your ove	enses include	_					☐ Yes
J.	expenses o	f people other to d your depende	han $_{f \Box}$	No Yes				
ехр	imate your ex enses as of a		our bankrı	uptcy filing date unless				pter 13 case to report f the form and fill in the
app	licable date.							
the		h assistance an		government assistance cluded it on <i>Schedule I</i> .			Your expe	enses
•		•						
4.		or home owners and any rent for the		ses for your residence or lot.	Include first mortgage	e 4. \$		800.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	i	0.00
	•	rty, homeowner's				4b. \$		0.00
			•	ıpkeep expenses		4c. \$		75.00
_		owner's associat				4d. \$		0.00
5.	Additional r	nortgage payme	ents for vo	our residence , such as l	nome equity loans	5. \$		0.00

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Debtor 1	Sherry L. Rowl	Case num	ber (if known)	
6. Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	310.00
6b.	Water, sewer, garbage collection	6b.	\$	130.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	520.00
6d.	Other. Specify:	6d.	· -	0.00
	d and housekeeping supplies			700.00
	dcare and children's education costs	8.	\$	0.00
_	ning, laundry, and dry cleaning	9.	\$	200.00
	onal care products and services	10.	\$	100.00
	ical and dental expenses	11.	· -	30.00
	sportation. Include gas, maintenance, bus or train fare.		Ψ	30.00
	ot include car payments.	12.	\$	300.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	itable contributions and religious donations	14.		0.00
5. Insu	•		<u> </u>	0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	·	300.00
15d	Other insurance. Specify:	15d.	· -	0.00
	ss. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Spec		16.	\$	0.00
	illment or lease payments:		<u> </u>	<u> </u>
	Car payments for Vehicle 1	17a.	\$	423.00
	Car payments for Vehicle 2	17b.	· -	400.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.		0.00
	payments of alimony, maintenance, and support that you did not report a		Ψ	0.00
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
	r payments you make to support others who do not live with you.	·-	\$	100.00
	Payments for others not living at home	19.	-	
	r real property expenses not included in lines 4 or 5 of this form or on Sch	hedule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	r: Specify: Birthdays/Holidays/Haircuts	21.	·	100.00
			+\$	
Spo	use Debts		+φ	650.00
22. Calc	ulate your monthly expenses			
22a.	Add lines 4 through 21.		\$	5,188.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	Add line 22a and 22b. The result is your monthly expenses.		\$	5,188.00
220.	The mid Lea and Leb. The result to your monthly expenses.			3,100.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,277.08
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	5,188.00
23c.	Subtract your monthly expenses from your monthly income.	22	.	90.09
	The result is your monthly net income.	23c.	\$	89.08
For e modif	ou expect an increase or decrease in your expenses within the year after y xample, do you expect to finish paying for your car loan within the year or do you expect yo ication to the terms of your mortgage?			ease or decrease because of a
■ N				
	es. Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Sherry L. Rowl			_	
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Cose number					
Case number					☐ Check if this is an amended filing
Official Forr Declarat	-	ın Individua	l Debtor's S	Schedules	12/15
years, or both. 1	y or property by fraud II 8 U.S.C. §§ 152, 1341, 1 n Below		kruptcy case can resu	ilt in fines up to \$250,000	0, or imprisonment for up to 20
		one who is NOT an atto	rney to help you fill ou	ut bankruptcy forms?	
■ No	, , ,			, ,	
☐ Yes. I	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the sur	nmary and schedules t	filed with this declaration	n and
Y lel She	arry I Powl		x		
Sherry	erry L. Rowl / L. Rowl Ire of Debtor 1			of Debtor 2	
Date .	July 29. 2017		Date		

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Fill ir	n this inform	nation to identify you	r case:			
Debte	or 1	Sherry L. Rowl				
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case	number					
(if knov						Check if this is an mended filing
	cial Fo					
			Affairs for Individ			4/16
inforn	nation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Part '			arital Status and Where You	Lived Before		
1. V	What is your	current marital statu	is?			
•	■ Married □ Not mar	ried				
2. [Ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
•	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part :	2 Explai	n the Sources of You	r Income	·		
F	fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,522.73	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 39 of 58 Case number (if known) Debtor 1 Sherry L. Rowl

				Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Check all that apply. (before		Gross income (before deductions and exclusions)		
	r last calen inuary 1 to	•	31, 2016)	■ Wages, commissions, bonuses, tips	\$43,856.62	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
	r the calend nuary 1 to			■ Wages, commissions, bonuses, tips	\$36,000.00	☐ Wages, comr bonuses, tips	nissions,	
				☐ Operating a business		Operating a b	ousiness	
	and other winnings. I	oublic benef f you are fili	fit payments; ng a joint cas he gross inco	er that income is taxable. Expensions; rental income; intelle and you have income that me from each source separa	rest; dividends; money collect you received together, list it c	eted from lawsuits; ronly once under De	oyalties; ar btor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	om January e date you f		nt year until nkruptcy:	Unemployment	\$1,765.00			
	r last calen nuary 1 to		31, 2016)	Unemployment	\$1,355.00			
Pal 6.	Are either No.	Debtor 1's Neither Deindividual p During the No. Yes * Subject	or Debtor 2' ebtor 1 nor Debtor 1 nor Debtor 1 nor Debtor 2 nor Debtor 2 nor Debtor 2 nor Include to adjustment or Debtor 2 nor Debtor 3 nor Debtor 2 nor Debtor 3 nor Debtor 3 nor Debtor 3 nor Debtor 4 nor Debtor 2 nor Debtor 3 nor Debtor	each creditor to whom you pai editor. Do not include paymen payments to an attorney for t on 4/01/19 and every 3 year r both have primarily consure you filed for bankruptcy, di	r debts? umer debts. Consumer debt Id purpose." id you pay any creditor a tota id a total of \$6,425* or more ints for domestic support oblig his bankruptcy case. is after that for cases filed on umer debts. id you pay any creditor a total id a total of \$600 or more and	in one or more paying ations, such as chill or after the date of all of \$600 or more?	e? ments and t ld support a adjustment	the total amount you and alimony. Also, do t. at creditor. Do not
	Creditor's	s Name and	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Ally Financial Attn: Bankruptcy Dept.	3/2017 - 5/2017	\$1,269.00	\$12,392.00	☐ Mortgage ■ Car
	PO Box 380901				☐ Credit Card
	Minneapolis, MN 55438-0901				☐ Loan Repayment
					☐ Suppliers or vendors
					Other
	www.ISpeedyLoans.com PO Box 184	3/2017 - 5/2017	\$975.26	\$2,300.00	☐ Mortgage ☐ Car
	Des Plaines, IL 60016				☐ Credit Card
	·				Loan Repayment
					☐ Suppliers or vendors
					• •
					Other
	Oppurtunity Financial LLC 130 E. Randolph Street, Suite 1650	3/2017 - 5/2017	\$861.51	\$1,600.00	☐ Mortgage ☐ Car
	Chicago, IL 60601				☐ Credit Card
	_				Loan Repayment
					☐ Suppliers or vendors
					☐ Other
	a business you operate as a sole proprietor. 1 alimony.	11 U.S.C. § 101. Include pa	ayments for domestic	support obligation	is, such as child support and
	☐ Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment
	insider a Name and Address	Dates of payment	paid	still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider?		yments or transfer a	any property on a	ccount of a debt that benefited ar
	Include payments on debts guaranteed or cos	signed by an insider.			
	NoYes. List all payments to an insider				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Da	rt 4: Identify Legal Actions, Repossession	ne and Foreclosures			
ı a	, , ,	,			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.				
	■ No				
	Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case

7.

8.

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Document Page 41 of 58 Debtor 1 Sherry L. Rowl Case number (if known) 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. П Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: Jean Perrin **Cash Assistance** 6/2015 -\$2,400.00 Rockford, IL 61101 6/2017 Person's relationship to you: Mother 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Value Dates you more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☐ Yes. Fill in the details.

No

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

Date of your loss

Value of property lost Case 17-81768 Doc 1 Filed 07/29/17 Entered 07/29/17 11:13:53 Desc Main Document

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Pai	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, of consulted about seeking bankruptcy or prepare Include any attorneys, bankruptcy petition prepare	ing a bankruptcy petition?			rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95		5/5/2017	\$14.95
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$0, \$4,000.00 to be paid throug plan.	gh the		\$0.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list. No Yes. Fill in the details.	or to make payments to your creditor		or transfer any prope	rty to anyone who
		Description and value of any property		Data marina ant	Am and of
	Person Who Was Paid Address	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Nationwide Debt Reduction 1213 Culbreth Drive Wilmington, NC 28405	\$233.00, which was returned t	o Debtor.	4/2017	\$233.00
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already list No ☐ Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a s			
	Person Who Received Transfer Address	Description and value of property transferred		any property or received or debts	Date transfer was made
	Person's relationship to you		paid iii ex	onange .	
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No Yes. Fill in the details.		elf-settled tru	ust or similar device	of which you are a
	Name of trust	Description and value of the prop	erty transferr	ed	Date Transfer was made

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Case number (if known) Document

Debtor 1 Sherry L. Rowl

Par	t 8: List of Certain Financial Accounts, I	nstruments, Safe	e Deposit I	Boxes, and	Storage Uni	its		
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asset No Yes. Fill in the details.	or other financi	al account	s; certificat	es of depos			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number		Type of accinstrument	count or	Date account was closed, sold, moved, or transferred	before clos	alance sing or ransfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	l year before yoι	ı filed for I	oankruptcy,	any safe de	eposit box or other depo	ository for secur	ities,
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		had acce (Number, Str IP Code)		Describe	the contents	Do you st have it?	:iII
22.	Have you stored property in a storage unit ■ No □ Yes. Fill in the details.	or place other t	han your I	nome within	1 year befo	ore you filed for bankrup	otcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	e has or ha (Number, Str IP Code)		Describe	the contents	Do you st have it?	:iII
Par	t 9: Identify Property You Hold or Control	ol for Someone E	Else					
23.	Do you hold or control any property that s for someone.	omeone else ow	ns? Inclue	de any prop	erty you bo	rrowed from, are storing	g for, or hold in	trust
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		the prope treet, City, Sta		Describe	the property		Value
Par	t 10: Give Details About Environmental In	formation						
For	the purpose of Part 10, the following defini	tions apply:						
	Environmental law means any federal, stattoxic substances, wastes, or material into	•	-		• .			ous or

- regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

■ No □ Yes. Fill in the details.			
Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Case 17-81768 Doc 1 Filed 07/29/17 Entered 07/29/17 11:13:53 Document Page 44 of 58 Debtor 1 Sherry L. Rowl Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Environmental law, if you Name of site Governmental unit Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Sherry L. Rowl
Sherry L. Rowl
Signature of Debtor 2
Signature of Debtor 1

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No

Date July 29, 2017

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107 Statemen

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Sherry L. Rowl

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Fill in this inform	nation to identify your	case:				
Debtor 1	Sherry L. Rowl					
Dahtara	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DIST	TRICT OF IL	LINOIS		
Case number						
(if known)						☐ Check if this is an amended filing
	nt of Intentio			Filing Under Chap	oter 7	, 12/15
_	ividual filing under cha e claims secured by yo		l out this fo	m if:		
you have leas	sed personal property a s form with the court w ever is earlier, unless th	nd the lease has notithin 30 days after	you file you	r bankruptcy petition or by the dat ause. You must also send copies to		
	eople are filing togethened date the form.	r in a joint case, bo	th are equa	ly responsible for supplying correc	ct inform	ation. Both debtors must
	and accurate as possib our name and case nur		s needed, at	tach a separate sheet to this form.	On the to	p of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims				
1. For any credit	ors that you listed in Pa	art 1 of Schedule D	: Creditors	Who Have Claims Secured by Prop	erty (Offi	cial Form 106D), fill in the
information be Identify the cre	elow. editor and the property t	hat is collateral	What do s	you intend to do with the property to debt?	that	Did you claim the property as exempt on Schedule C?
Creditor's A name:	Illy Financial			der the property. the property and redeem it.		□ No
Description of	2007 Dodge Ram 1	13,000 miles		the property and enter into a rmation Agreement.		■ Yes
property securing debt:			☐ Retain	the property and [explain]:		
Dort 2. Lint Vo	aur Unavaired Darsons	l Dramarty I again				
For any unexpire in the informatio	n below. Do not list rea	ase that you listed Il estate leases. Un	expired leas	G: Executory Contracts and Unex ses are leases that are still in effect does not assume it. 11 U.S.C. § 365	; the leas	
Describe your u	nexpired personal pro	perty leases			Will	the lease be assumed?
Lessor's name:					п.	
Description of lea	ased					NO
Property:					ο,	/es
Lessor's name:					□ 1	No
Description of lea Property:	ased					∕es
Loccorio nomo:						
Lessor's name:					□ I	NO
Official Form 108		Statement of In	tention for I	ndividuals Filing Under Chapter 7		page ²

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Debtor	1 Sherry L. Rowl	Case number (if known)	
Descrip Propert	ption of leased tv:		☐ Yes
	7 .		□ 163
	's name:		□ No
Propert	ption of leased ty:		☐ Yes
	's name:		□ No
Descrip Propert	ption of leased ty:		☐ Yes
	's name:		□ No
Propert	ption of leased ty:		☐ Yes
			65
	's name:		□ No
Propert	otion of leased ty:		☐ Yes
Part 3:	Sign Below		
Under p	penalty of perjury, I declare that I have indicated my intention	about any property of my estate that se	cures a debt and any personal
	y that is subject to an unexpired lease.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
χ /s	s/ Sherry L. Rowl	X	
	herry L. Rowl	Signature of Debtor 2	
Si	ignature of Debtor 1		
Da	ate July 29, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

(Chapter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
=	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81768 Doc 1 Filed 07/29/17 Entered 07/29/17 11:13:53 Desc Main Document Page 52 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	re Sherry L. Rowl		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	ENSATION OF ATTOI	RNEY FOR DE	CBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	, or agreed to be paid	to me, for services rea	ndered or to		
	For legal services, I have agreed to accept		\$	500.00			
	Prior to the filing of this statement I have received		\$	500.00			
	Balance Due			0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	pers and associates of	my law firm.		
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na				w firm. A		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credid. [Other provisions as needed] 	atement of affairs and plan which tors and confirmation hearing, an	n may be required; nd any adjourned hea	rings thereof;			
	Negotiations with secured creditors to reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on he	ons as needed; preparation					
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dany other adversary proceeding.	ee does not include the following ischargeability actions, judi	g service: cial lien avoidanc	es, relief from stay	actions or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of a s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the de	ebtor(s) in		
	July 29, 2017	/s/ Daniel A. Spri	nger				
	Date	Daniel A. Springe					
		Signature of Attorne Springer Law Fire					
		2222 E State St					
		Suite 107 Rockford, IL 6110	n4				
		815.312.4725	V T				
		dspringerlaw@gı	mail.com				
		Name of law firm					

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Desc Main

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 7-29-17	
Signature: <u>Sherry Row!</u> Print Name: <u>Sherry Row!</u>	Attorney Signature: Attorney Print:

United States Bankruptcy CourtNorthern District of Illinois

Not then District of Himois								
In re	Sherry L. Rowl		Case No.					
		Debtor(s)	Chapter	7				
	V	ERIFICATION OF CREDITOR I	MATRIX					
		Number o	of Creditors: _	37				
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of cred	litors is true and	correct to the best of my				
Date:	July 29, 2017	/s/ Sherry L. Rowl Sherry L. Rowl Signature of Debtor						

Ally Financial Attn: Bankruptcy Dept. PO Box 380901 Minneapolis, MN 55438-0901

Avant Credit Attn: Bankruptcy Dept. 640 N La Salle Dr. Suite 535 Chicago, IL 60654

Barclays Bank Delaware Attn: Bankruptcy Dept. 125 S West St. Wilmington, DE 19801

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

Comenity Bank Attn: Bankruptcy Dept. PO Box 182789 Columbus, OH 43218

Convergent Healthcare Inc. Attn: Bankruptcy Dept. 121 NE Jefferson St. Suite 100 Peoria, IL 61602

Crusader Clinic Attn: Bankruptcy Dept. 1200 W. State St. Rockford, IL 61102

Elan Financial Services P.O. Box 108 Saint Louis, MO 63166

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

First National Credit CA 500 E 60th St N Sioux Falls, SD 57104

First Premier Bank Attn: Bankruptcy Dept. 3820 N Louise Ave Sioux Falls, SD 57107

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Jefferson Capital Systems Attn: Bankruptcy Dept. 16 Mcleland Rd Saint Cloud, MN 56303

Kohls
Attn: Bankruptcy Dept.
PO Box 3115
Milwaukee, WI 53201

Lane Bryant Retail 450 Winks Ln Bensalem, PA 19020

MABT/CONTFIN PO Box 8099 Newark, DE 19714

Merrick Bank Attn: Bankruptcy Dept. PO Box 9201 Old Bethpage, NY 11804

Mid America B&T Genesis PO Box 4499 Beaverton, OR 97076

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Oppurtunity Financial LLC 11 E. Adams Street Suite 501 Chicago, IL 60603

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Personal Finance Attn: Bankruptcy Dept. 270 North Mulford Rd. Rockford, IL 61107

Portfolio Recovery Associates Attn: Bankruptcy Dept. 120 Corporate Blvd., Ste 100 Norfolk, VA 23502

Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Security Finance Corporation Attn: Bankruptcy Dept. PO Box 3146 Spartanburg, SC 29304

State Collection Service Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701 SYNCB/JC Penney Attn: Bankruptcy Dept. PO Box 965007 Orlando, FL 32896

SYNCB/Old Navy DC PO BOX 965005 Orlando, FL 32896

SYNCB/Wal-Mart Attn: Bankruptcy Dept. PO Box 965024 Orlando, FL 32896

TransUnion 555 West Adams Street Chicago, IL 60661

World Finance Company PO Box 6429 Greenville, SC 29606

World Finance Corporation Attn: Bankruptcy Dept. 2570 Charles St. Rockford, IL 61108

www.ISpeedyLoans.com PO Box 184 Des Plaines, IL 60016

Zale Delaware 375 Ghent Road Akron, OH 44333